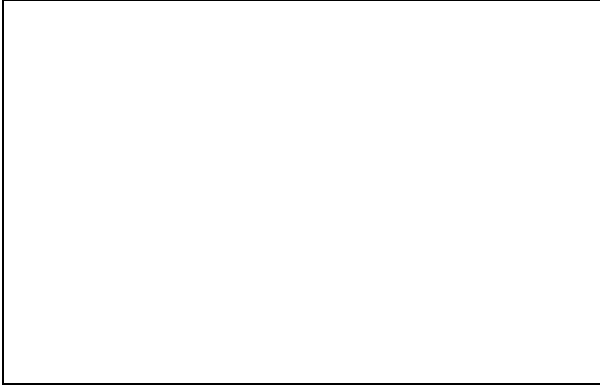


PATIENT ADMISSION INFORMATION



MY PET IS HERE TO SEE DOCTOR:

_____ *Abramson* _____ *Beale* _____ *Hottinger*
_____ *Hunter* _____ *Liska* _____ *Longshore*
_____ *Whitney* _____ *Antinoff* _____ *Chen*

REASON FOR VISIT TODAY: *Surgery* _____ *Recheck Exam* _____ *Radiographs* _____

Bandage Change _____ *Suture Removal* _____ *Other* _____

TIME OF LAST MEAL _____ PREFERRED PICKUP TIME FOR DAY PATIENT _____

If you are dropping off your pet for a routine suture removal, bandage change, or recheck, your pet will be examined by the doctor. It is possible the doctor may not be available to speak with you at the time you pick up your pet because of scheduled appointments or surgery. If you are dropping your pet off for the day only, and you wish to guarantee that you speak with the doctor, we ask that you schedule an appointment now with the receptionist.

TODAY'S CONTACT NUMBER(S):

(Daytime – until what time) _____

(Evening – after what time) _____

(Other) _____ E-MAIL ADDRESS _____

Pets rarely go home the same day they have surgery. Many calls are made after 6:00pm. We will call you after surgery. If you have not heard from us by 5:30pm, feel free to call for an update.

► **CURRENT MEDICATIONS:** Are you leaving medications now? _____ Yes _____ No

Type of medication and mg. Frequency Given Time Last Dose Given

► **IS YOUR PET ON A SPECIAL DIET?** _____ Yes _____ No Did you bring special food? _____ Yes _____ No

Please describe special diet: _____

PROBLEMS, QUESTIONS OR CONCERNS REGARDING YOUR PET _____

Please be assured that we provide comfortable quarters for all patients. We prefer that you do not leave valuable items at the hospital that could become misplaced or lost in the laundry. If you do leave personal items, please add identification. Unfortunately, we cannot be responsible for your pet's belongings.